



**2012
ABERDEEN FALL GYMNASTICS**

**GYMNASTICS REGISTRATION MAY BE HANDLED BY MAIL OR YOU MAY
ATTEND REGISTRATION ON TUESDAY, SEPTEMBER 11TH FROM 6:00 TO
7:30PM – REGISTRATION AND ALL CLASSES WILL BE HELD AT THE
HARFORD COUNTY COMMUNITY SERVICES BUILDING AT
34 N. PHILADELPHIA BLVD.**

FIRST CLASS WILL BE HELD ON MONDAY, SEPTEMBER 24th

4:30 – 5:30PM	5 YEARS AND OLDER
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FIRST CLASS WILL BE HELD ON WEDNESDAY, SEPTEMBER 26th

6:00 – 6:50PM	LEARNING THRU MOVEMENT 2 ½ TO 3 ½ YEAR OLDS (must be 2 ½ by the first day of class)
7:00 – 7:50PM	3 ½ TO 4 YEAR OLDS

FIRST CLASS WILL BE HELD ON THURSDAY, SEPTEMBER 27th

4:30 – 5:30PM	5 YEARS AND OLDER
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FEES:

\$50.00 FOR 10 WEEKS/ ONCE A WEEK CLASSES

NO REFUNDS OR TRANSFERS

**MAKE CHECKS PAYABLE TO: ABERDEEN BOARD OF PARKS AND REC
MAIL TO: ACPR GYMNASTICS, P.O. BOX 248, CHURCHVILLE, MD. 21028**

FOR MORE INFORMATION, CALL 410/836-2080

E-MAIL: CORNGYM@COMCAST.NET

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2012 FALL ABERDEEN GYMNASTICS REGISTRATION FORM

DAY:	TIME:	CLASS NAME:	
CHILD'S NAME:	PHONE #:		
ADDRESS:	ZIP:		
DATE OF BIRTH:	AGE:		
PARENT'S NAME:			
EMERGENCY NAME & PHONE#:			
AMT PD.	CASH	CHECK #	DATE

I agree that I will not hold the program, instructor, or the Aberdeen Board of Parks and Recreation responsible for any injuries received while participating in the gymnastics program. I understand and accept that there are inherent risks involved in participating in gymnastics and I certify, by my signature, that my child is physically capable of participating in this program. . I also understand that information on YOUTH SPORTS CONCUSSIONS AND HEAD INJURIES is available ON LINE at www.cdc.gov/concussioninyouthsports or you can call 1-800/232-4636.

Any physical conditions or allergies that the instructor should be made aware of _____

Parent's Signature _____ Date _____